

15 APR 2009

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

10/531535

FILING DATE

APPLICANT(S)

4/15/05

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2		/				
3	/	/	/			
4		/				
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TOTAL IND.	3		2			
TOTAL DEP.	8	↙	9	↙		
TOTAL CLAIMS	11	[REDACTED]	11	[REDACTED]		

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.					↙	
TOTAL DEP.					↙	↙
TOTAL CLAIMS					↙	↙